PTO/SB/22 (04-09) Approved for use through 05/31/2009, OMB 0651-0031 U.S. Patent and Trademark Office; U.S. DEPARTMENT OF COMMERCE Under the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless if displays a valid OMB control number Docket Number (Optional) PETITION FOR EXTENSION OF TIME UNDER 37 CFR 1.136(a) ITV-001 FY 2009 (Fees pursuant to the Consolidated Appropriations Act. 2005 (H.R. 4818).) Application Number 10/706.850 Filed November 12, 2003 Method and system for tracking and behavioral monitoring of multiple objects moving through multiple For fields-of-view Art Unit 2621 Examiner Czekai, David J. This is a request under the provisions of 37 CFR 1,136(a) to extend the period for filing a reply in the above identified The requested extension and fee are as follows (check time period desired and enter the appropriate fee below): Small Entity Fee Fee X One month (37 CFR 1.17(a)(1)) \$130 \$65 130.00 Two months (37 CFR 1.17(a)(2)) \$490 \$245 Three months (37 CFR 1.17(a)(3)) \$1110 \$555 Four months (37 CFR 1.17(a)(4)) \$1730 \$865 Five months (37 CFR 1.17(a)(5)) \$2350 \$1175 Applicant claims small entity status. See 37 CFR 1.27. A check in the amount of the fee is enclosed. Payment by credit card. Form PTO-2038 is attached. The Director has already been authorized to charge fees in this application to a Deposit Account. X The Director is hereby authorized to charge any fees which may be required, or credit any overpayment, to Deposit Account Number 07-1700 WARNING: Information on this form may become public. Credit card information should not be included on this form. Provide credit card information and authorization on PTO-2038. I am the applicant/inventor. assignee of record of the entire interest. See 37 CFR 3.71. Statement under 37 CFR 3.73(b) is enclosed. (Form PTO/SB/96). х attorney or agent of record. Registration Number 56,401 attorney or agent under 37 CFR 1.34. Registration number if acting under 37 CFR 1.34 /Joel E. Lehrer/ May 20, 2009 Signature Date Joel E. Lehrer (617) 570-1057 Typed or printed name Telephone Number NOTE. Signatures of all the inventors or assignees of record of the entire interest or their representative(s) are required. Submit multiple forms if more one signature is required, see below

I hereby certify that this paper (along with any paper referred to as being attached or enclosed) is being transmitted via the Office electronic filing system in accordance with § 1.6(a)(4).	
Dated: May 20, 2009	Electronic Signature for Joel E. Lehrer: /Joel E. Lehrer/

forms are submitted.

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